

<b>United States Bankruptcy Court</b> <b>Northern District of Illinois</b>					<b>Voluntary Petition</b>						
Name of Debtor (if individual, enter Last, First, Middle): <b>James, Michael, James ABNER</b>					Name of Joint Debtor (Spouse) (Last, First, Middle): <b>James, Lisa, Michelle</b>						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>N/A</b>					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>Strange, Lisa, Michelle</b>						
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>6563</b>					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>1002</b>						
Street Address of Debtor (No. and Street, City, and State): <b>9809 Hillview Avenue</b> <b>Fox River Grove, IL</b> <div style="text-align: right;">ZIP CODE <b>60021</b></div>					Street Address of Joint Debtor (No. and Street, City, and State): <b>9809 Hillview Avenue</b> <b>Fox River Grove, IL</b> <div style="text-align: right;">ZIP CODE <b>60021</b></div>						
County of Residence or of the Principal Place of Business: <b>McHenry</b>					County of Residence or of the Principal Place of Business: <b>McHenry</b>						
Mailing Address of Debtor (if different from street address): <b>Same</b> <div style="text-align: right;">ZIP CODE</div>					Mailing Address of Joint Debtor (if different from street address): <b>Same</b> <div style="text-align: right;">ZIP CODE</div>						
Location of Principal Assets of Business Debtor (if different from street address above): <b>N/A</b> <div style="text-align: right;">ZIP CODE</div>											
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)</b>  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding			<b>Nature of Debts</b> (Check one box.)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.				
<b>Filing Fee (Check one box.)</b>  <input checked="" type="checkbox"/> Full Filing Fee attached.  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).  <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).						
<b>Statistical/Administrative Information</b>  <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.										<b>THIS SPACE IS FOR COURT USE ONLY</b>	
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000											
<b>Estimated Assets</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion											
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion											

**Voluntary Petition**

(This page must be completed and filed in every case.)

Document

Page 2 of 50

Name of Debtor(s)

Michael and Lisa James

**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet.)

Location Where Filed: <b>N/A</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet.)

Name of Debtor: <b>N/A</b>	Case Number:	Date Filed:
District: <b>Northern District of Illinois</b>	Relationship:	Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X **N/A**

Signature of Attorney for Debtor(s) (Date)

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**

(Check any applicable box.)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes.)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

**N/A**

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B 1 (Official Form) 1 (1/08)

Page 3

**Voluntary Petition***(This page must be completed and filed in every case.)*

Name of Debtor(s):

**Michael and Lisa James****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Debtor

X

Signature of Joint Debtor

847-639-8338

Telephone Number (if not represented by attorney)

12/22/09

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X N/A

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

Date

**Signature of Attorney\***

X

N/A

Signature of Attorney for Debtor(s)

Printed Name of Attorney for Debtor(s)

Firm Name

Address

Telephone Number

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X N/A

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

N/A

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

B 1D (Official Form 1, Exhibit D) (12/09)

# UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Michael and Lisa James  
Debtor

Case No. \_\_\_\_\_  
(if known)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

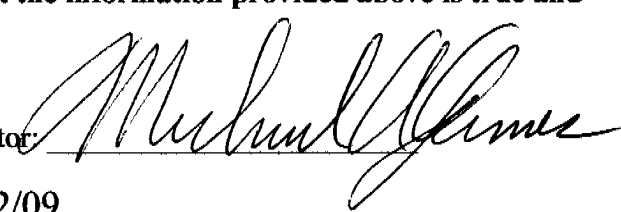
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: 

Date: 12/22/09

B 1D (Official Form 1, Exhibit D) (12/09)

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Michael and Lisa James  
Debtor

Case No. \_\_\_\_\_  
(if known)

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

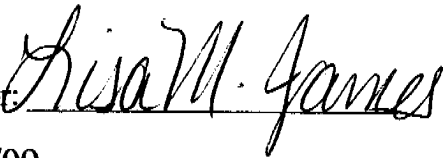
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: 

Date: 12/22/09

B6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court

Northern District Of Illinois

In re Michael and Lisa James,  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 180,000.00		
B - Personal Property	YES	4	\$ 14,533.17		
C - Property Claimed as Exempt	YES	2			
D - Creditors Holding Secured Claims	YES	1		\$ 189,223.03	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	13		\$ 131,259.79	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 3,864.00
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 3,875.00
<b>TOTAL</b>		28	\$ 194,533.17	\$ 320,482.82	



Form 6 - Statistical Summary (12/07)

# United States Bankruptcy Court

Northern District Of Illinois

In re Michael and Lisa James  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	<b>\$ 0.00</b>

### State the following:

Average Income (from Schedule I, Line 16)	\$3,864.00
Average Expenses (from Schedule J, Line 18)	\$3,875.00
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$5,198.66

### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$9,223.03
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$131,259.79
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$140,482.82

In re Michael and Lisa James  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residence 9809 Hillview Avenue Fox River Grove, IL 60021	Fee Simple	J	\$180,000.00	\$189,223.03

Total▶ **\$180,000.00**  
(Report also on Summary of Schedules.)

In re Michael and Lisa James  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Amcore Bank, NA, Rockford, IL, Checking Acct# 9800953969 \$358.70-\$94.60 (trans. posting) 12/23/09 = \$264.10; Central Credit Union of IL, Bellwood, IL Savings Acct# 833131006 \$75.38	J	\$339.48
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		See attached, Craigslist & Ebay, 9809 Hillview Ave Fox River Grove, IL 60021, (debtor's residence)	J	\$5,465.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Used cook & children's books \$40, family pics. \$50, resale shop & Craigslist (debtor's residence)	J	\$90.00
6. Wearing apparel.		Everyday clothes, resale shop (debtor's residence)	J	\$400.00
7. Furs and jewelry.		2 watches @ \$50, wedding band 300, (debtor's resid)	J	\$400.00
8. Firearms and sports, photographic, and other hobby equipment.		Digital camera, Ebay (debtor's residence)	J	\$75.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X	Jewelry above (7.) priced on Ebay & Craigslist		
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		(H) IL Toll. Pension, state employ., (W) Sherman Health, 401k (ERISA), not in bankruptcy estate	J	0.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		(H) IL Toll wages 11/30/09 - 12/22/09 \$3,188.07 (W) Sherman wages 12/13/09 - 12/22/09 \$370.62	J	\$3,558.69
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property.	X	All above are gross wages		
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1997 Ford E150 \$1985, 1996 Toyota Camry, \$2220 priced fair kbb.com (debtor's residence)	J	\$4,205.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
3 continuation sheets attached Total▶				\$14533.17

(Include amounts from any continuation  
sheets attached. Report total also on  
Summary of Schedules.)

In re Michael and Lisa James, Case No. \_\_\_\_\_  
(debtor) (If known)

## SCHEDULE B - PERSONAL PROPERTY

(Attachment Sheet)

TYPE OF PROPERTY	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH-OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
4. Household goods and furnishings, including audio video, and computer equipment	washer & dryer	\$500.00
	refrigerator	\$400.00
	stove	\$325.00
	microwave	\$60.00
	toaster oven	\$30.00
	blender	\$30.00
	mixer	\$30.00
	stereo	\$200.00
	television	\$250.00
	disc player	\$100.00
	mp3 player	\$80.00
	computer	\$300.00
	printer	\$50.00
	phones	\$50.00
	camcorder	\$100.00
	futon	\$200.00
	chairs	\$250.00
	table & chairs	\$130.00
	tv trays	\$20.00
	desk	\$125.00
	cookware, Tupperware & utensils	\$300.00
	king bed	\$350.00
	full bed	\$200.00
	bedding	\$100.00
	dressers	\$270.00
	lawnmower	\$150.00
	snowblower	\$100.00
	gardening tools	\$80.00
	tools	\$150.00
	toys	\$150.00
	2 lamps	\$40.00
	clocks	\$25.00
	steam iron	\$20.00
	vacuum	\$60.00
	towels	\$40.00
	miscellaneous household items	\$200.00
Attachment Totals		\$5,465.00

In re Michael and Lisa James  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Real Property Residence 9809 Hillview Avenue Fox River Grove, IL 60021	735 ILCS 5/12-901	\$0.00	\$180,000.00
Checking, Savings: Amcore Bank, NA, Rockford, IL Chkg Acct# 9800953969 \$358.70 - \$94.60 (trans. pend. 12/23/09) = \$264.10; Central Credit Union of IL Bellwood, IL Svgs Acct# 833131006 \$78.38	735 ILCS 5/12-1001 (b)	\$339.48	\$339.48
Household goods and furnishings See list attached at the end of Schedule B	735 ILCS 5/12-1001 (b)	\$5,465.00	\$5,465.00
Books & pictures Used cookbooks & family pictures	735 ILCS 5/12-1001 (b)	\$90.00	\$90.00
_1_ continuation sheet attached to Schedule of Property Claimed as Exempt			

B6C (Continuation Sheet)

In re Michael and Lisa James,  
(debtor)

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Wearing apparel Everyday clothing and coats	735 ILCS 5/12-1001 (a)	\$400.00	\$400.00
Furs and jewelry 2 watches \$50 each = \$100 & wedding band \$300, debtor's residence	735 ILCS 5/12-1001 (b)	\$400.00	\$400.00
Firearms and sports, photographic, and other hobby equipment Digital Camera	735 ILCS 5/12-1001 (b)	\$75.00	\$75.00
Interests in IRA, ERISA, Keogh, other pension or other profit sharing plans IL State Tollway Pension, state employee exempt (husband) T. Rowe Price 401k, ERISA Qualified pension (wife) both not included in the bankruptcy estate	40 ILCS 5/14-147 735 ILCS 5/12-1006	\$0.00	\$0.00
Other liquidated debts owed to debtor including tax refunds Illinois State Tollway wages \$3,188.07 (husband) Sherman Health wages \$370.62 (wife)	740 ILCS 170/4	\$3,558.69	\$3,558.69
Automobiles, trucks, trailers, and other vehicles and accessories 1997 Ford E150 \$1,985.00 1996 Toyota Camry \$2,220.00	735 ILCS 5/12-1001 (c)	\$4,205.00	\$4,205.00
Subtotal from this page:		\$8,638.69	\$8,638.69
Subtotal from front page:		\$5,894.48	\$185,894.48
Total:		\$14,533.17	\$194,533.17



### Debtor

**Case No.**

(If known)

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (12/07)

In re Michael and Lisa James  
**Debtor**

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

**B6E (Official Form 6E) (12/07) – Cont.**

In re Michael and Lisa James,  
Debtor

Case No. \_\_\_\_\_  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

In re

Michael and Lisa James

Document

Page 20 of 50

Debtor

Case No.

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 611848490 Advocate Good Shepard Hospital PO Box 70014 Chicago, IL 60673-0014		J	06/28/08 - 06/30/08 Medical Expenses \$545.57 See Illinois Collection Service, Inc. 11112055				Duplicate
ACCOUNT NO. 11112055 Illinois Collection Service, Inc. PO Box 1010 Tinley Park, IL 60477-9110		J	Collection for Advocate Good Shepard Hospital 611848490				\$545.57
ACCOUNT NO. 611815887 Advocate Good Shepard Hospital PO Box 70014 Chicago, IL 60673-0014		J	06/28/08 - 06/30/08 Medical Expenses \$560.18 See Illinois Collection Service, Inc. 11145034				Duplicate
ACCOUNT NO. 11145034 Illinois Collection Service, Inc. PO Box 1010 Tinley Park, IL 60477-9110		J	Collection for Advocate Good Shepard Hospital 611815887				\$560.18
Subtotal							\$1,105.75
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							\$131,259.79

12 continuation sheets attached

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 611848490 Advocate Good Shepard Hospital PO Box 70014 Chicago, IL 60673-0014		J	07/03/08 - 07/31/08 Medical Expenses \$51.12 See Illinois Collection Service, Inc. 11145037				Duplicate
ACCOUNT NO. 11145037 Illinois Collection Service, Inc. PO Box 1010 Tinley Park, IL 60477-9110		J	Collection for Advocate Good Shepard Hospital 618848490				\$51.12
ACCOUNT NO. 377261067221005 American Express PO Box 6618 Omaha, NE 68105-0618		J	12/07 - 01/09 American Express card \$1,599.12 See Blitt and Gaines, P.C. 09352600				Duplicate
ACCOUNT NO. 3499915159280913 American Express PO BOX 981537 El Paso, TX 79998		H	<=Account# is reported in all 3 credit reports, account# on the statements is 377261067221005, amount owed to American Express is same, \$1,599.12 See Blitt and Gaines, P.C. 09352600				Duplicate
ACCOUNT NO. 377261067221005 Aegis Receivables Management, Inc. PO Box 10908 San Rafael, CA 94912-0908		H	Collection for American Express Account# 377261067221005 \$1,599.12 See Blitt and Gaines, P.C. 09352600				Duplicate
Sheet no. 1 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ \$51.12
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total▶ \$ \$131,259.79

**Case No.** \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. HI7960 NCO Financial Systems, Inc. 1804 Washington Boulevard Mailstop 450 Baltimore, MD 21230		H	Collection for American Express Account# 377261067221005 \$1,599.12 See Blitt and Gaines, P.C. 09352600				Duplicate
ACCOUNT NO. 09352600 Blitt and Gaines, P.C. 661 West Glenn Avenue Wheeling, IL 60090		H	Collection for American Express Account# 377261067221005				\$1,599.12
ACCOUNT NO. 74975944356058 Bank of America PO BOX 15102 Wilmington, DE 19886		H	02/07 - 02/09 Line of credit \$56,418.74 See NCO Financial Systems, Inc. CRX776				Duplicate
ACCOUNT NO. 74975999900974 Bank of America/FIA Card Services, N.A. 655 Papermill Road Wilmington, DE 19884		H	Collection for Bank of America Account# 74975944356058 \$56,418.74 See NCO Financial Systems, Inc. CRX776				Duplicate
ACCOUNT NO. 09065168693 Nationwide Credit, Inc. PO Box 740640 Atlanta, GA 30374-0640		H	Collection for Bank of America Account# 74975944356058 \$56,418.74 See NCO Financial Systems, Inc. CRX776				Duplicate
Sheet no. 2 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$1,599.12
							Total ▶ \$131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Michael and Lisa James  
Debtor

**Case No.** \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 13454144BA1 Creditors Interchange 80 Holtz Drive Buffalo, NY 14225		H	Collection for Bank of America/FIA Card Services Account# 74975999900974 \$56,418.74 See NCO Financial Systems, Inc. CRX776				Duplicate
ACCOUNT NO. CRX776 NCO Financial Systems, Inc. PO BOX 17080 Wilmington, DE 19850-7080		H	Collection for Bank of America Account# 74975999900974 \$56,418.74				\$56,418.74
ACCOUNT NO. 5140217999882269 Barclays Bank Delaware/Juniper Card Services PO Box 8833 Wilmington, DE 19899-8833		J	01/06 - 02/09 Credit Card \$6,082.79 See Collectcorp Corporation BAR74091827440				Duplicate
ACCOUNT NO. 12262022 Encore Receivable Management, Inc. PO Box 3330 Olathe, KS 66063-3330		J	Collection for Barclays Bank Delaware/Juniper 5140217999882269 \$5,531.60 See Collectcorp Corporation BAR74091827440				Duplicate
ACCOUNT NO. 12397740 Firstsource Advantage, LLC PO BOX 628 Buffalo, NY 14240-0628		J	Collection for Barclays Bank Delaware/Juniper 5140217999882269 \$6,082.79 See Collectcorp Corporation BAR74091827440				Duplicate
Sheet no. 3 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$56,418.74
							Total ▶ \$131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. BAR74091827440 Collectcorp Corporation 455 North 3rd Street Suite 260 Phoenix, AZ 85004-3924		J	Collection for Barclaycard US - Middle/Juniper 5140217999882269				\$6,082.79	
ACCOUNT NO. 5122571010697581 Chase Cardmember Service PO Box 15153 Wilmington, DE 19886-5153		J	11/07 - 01/09 Credit Card \$1,373.24 See Redline Recovery Services, LLC C8769				Duplicate	
ACCOUNT NO. 008435886030000 Valentine & Kebartas, Inc. PO Box 325 Lawrence, MA 01842-0625		J	Collection for Chase Bank USA, NA 5122571010697581 \$1,373.24 See Redline Recovery Services, LLC C8769				Duplicate	
ACCOUNT NO. C8769 Redline Recovery Services, LLC 11675 Rainwater Drive Suite 350 Alpharetta, GA 30009-8693		J	Collection for JP Morgan Chase Bank, N.A. 5122571010697581				\$1,373.24	
ACCOUNT NO. 5122571010726067 Chase Cardmember Service PO Box 15153 Wilmington, DE 19886-5153		H	11/07 - 01/09 Credit Card \$2,023.49 See Associated Recovery Systems 18595390				Duplicate	
Sheet no. <u>4</u> of <u>12</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶	\$ 7,456.03
							Total ▶	\$ 131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 008433009035251 Valentine & Kebartas, Inc. PO Box 325 Lawrence, MA 01842-0625		H	Collection for Chase Bank USA, NA 5122571010726067 \$2,023.49 See Associated Recovery Systems 18595390				Duplicate
ACCOUNT NO. A65417 NCO Financial Systems, Inc. PO Box 15081 Wilmington, DE 19850-5740		H	Collection for Chase Bank USA, NA 5122571010726067 \$2,023.49 See Associated Recovery Systems 18595390				Duplicate
ACCOUNT NO. 18595390 Associated Recovery Systems PO Box 469048 Escondido, CA 92046-9048		H	Collection for Chase Bank USA, NA 5122571010726067				\$2,023.49
ACCOUNT NO. 1820000005055369 Chase/Circuit City Cardmember Services PO Box 15325 Wilmington, DE 19886-5325		J	07/08 - 02/09 Store credit card \$3,691.93 See MRS Associates, Inc. 1820000005055369				Duplicate
ACCOUNT NO. 046931941 Capital Management Services, LP 726 Exchange Street Suite 700 Buffalo, NY 14210		J	Collection for Chase Card Services/Circuit City 1820000005055369 \$3,691.93 See MRS Associates, Inc. 1820000005055369				Duplicate
Sheet no. <u>5</u> of <u>12</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ \$2,023.49
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total▶ \$ \$131,259.79

In re Michael and Lisa James  
Debtor

**Case No.** \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1820000005055369 MRS Associates, Inc. 1930 Olney Avenue Cherry Hill, NJ 08003		J	Collection for Chase Card Services/Circuit City 1820000005055369				\$3,691.93
ACCOUNT NO. 4185871271223904 Chase/Washington Mutual Card Services PO Box 660487 Dallas TX, 75266-0487		J	01/07 - 07/09 Credit Card \$16,900.44 See Haster Law Office, P.A. 4185871271223904				Duplicate
ACCOUNT NO. 40678689362271PE5 I.C. System, Inc. PO Box 64887 St. Paul, MN 55164-0887		J	Collection for Washington Mutual Card Services 4185871271223904 \$15,742.32 See Haster Law Office, P.A.				Duplicate
ACCOUNT NO. 41549909 Bureau of Collection Recovery, Inc. 7575 Corporate Way Eden Prairie, MN 55344		J	Collection for Washington Mutual Card Services 4185871271223904 \$16,516.15 See Haster Law Office, P.A.				Duplicate
ACCOUNT NO. 4185871271223904 Riverwalk Holdings, Ltd., ii 1132 Glade Road Colleyville, TX 76034		J	Collection for Washington Mutual Card Services 4185871271223904 \$21,441.06 See Haster Law Office, P.A.				Duplicate
Sheet no. 6 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$3,691.93
							Total▶ \$131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4185871271223904 Haster Law Office, P.A. 6640 Shady Oak Road Suite 340 Eden Prairie, MN 55344		J	Collection for Washington Mutual Card Services 4185871271223904				\$21,743.70
ACCOUNT NO. 6035320017609882 Citibank/The Home Depot Credit Services Processing Center Des Moines, IA 50364-0500		J	09/08 - 04/09 Store Credit Card \$249.35 See NCO Financial Systems, Inc. NK6126				Duplicate
ACCOUNT NO. NK6126 NCO Financial Systems, Inc. PO Box 15889 Wilmington, DE 19850-5889		J	Collection for Citibank (South Dakota), N.A. 6035320017609882				\$249.35
ACCOUNT NO. 5121071964856060 Citibank/Sears Credit Cards PO Box 183082 Columbus, OH 43218-3082		W	12/07 - 01/09 Credit Card \$2,714.82 See Credit Control, LLC 3977342				Duplicate
ACCOUNT NO. 5121071964856060 LVNV Funding, LLC P.O. Box 10584 Greenville, SC 29603		W	Collection for Sears Credit Cards 5121071964856060 \$2,832.00 See Credit Control, LLC 3977342				Duplicate
Sheet no. 7 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$21,993.05
							Total ▶ \$131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 13016015MC1 Creditors Interchange PO Box 1335 Buffalo, NY 14240-1335		W	Collection for Sears Credit Cards 5121071964856060 \$2,715.56 See Credit Control, LLC 3977342				Duplicate
ACCOUNT NO. 3977342 Credit Control, LLC PO Box 488 Hazelwood, MO 63042		W	Collection for LVNV Funding, LLC/Sears 5121071964856060				\$2,780.27
ACCOUNT NO. 0865222103 Fifth Third Bank, Chicago PO Box 630778 Cincinnati, OH 45263-0778		J	03/07 - 05/09 2007 Fleetwood Avalon camper Repossessed 11/08 \$10,517.17 See Client Services, Inc. 9777915				Duplicate
ACCOUNT NO. 30110862161 Regional Adjustment Bureau PO Box 34111 Memphis, TN 38184-0111		J	Collection for Fifth Third Bank, Toledo, OH 865222103 \$10,550.72 See Client Services, Inc. 9777915				Duplicate
ACCOUNT NO. 9777915 Client Services, Inc. 3451 Harry Truman Boulevard St. Charles, MO 63301-4047		J	Collection for Fifth Third Bank 0865222103				\$10,671.45
Sheet no. <u>8</u> of <u>12</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ \$13,451.72
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total▶ \$ \$131,259.79

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6034590700778936 GE Money Bank/ABT TV PO Box 871127 El Paso, TX 79998-1127		J	05/07 - 02/09 Store credit card \$3,195.34 See Nelson, Watson & Associates, LLC				Duplicate
ACCOUNT NO. 3338729 Encore Receivable Management, Inc. 400 North Rogers Road Olathe, KS 66063-3330		J	Collection for GE Money Bank/ABT TV Account# 6034590700778936 \$2,633.00 See Nelson, Watson & Associates, LLC				Duplicate
ACCOUNT NO. 44539383 Arrow Financial Services/ GE Money Bank 5996 West Touhy Avenue Niles, IL 60714-4610		J	Collection for GE Money Bank/ABT TV Account# 6034590700778936 \$3,226.75 See Nelson, Watson & Associates, LLC				Duplicate
ACCOUNT NO. 5092766 National Enterprise Systems 29125 Solon road Solon, OH 44139-3442		J	Collection for Arrow Financial Services/ GE Money Bank Account# 5092766 \$3,226.75 See Nelson, Watson & Assoc., LLC 6034590700778936				Duplicate
ACCOUNT NO. 052814794 Capital Management Services, LP 726 Exchange Street Suite 700 Buffalo, NY 14210		J	Collection for GE Money Bank/ABT TV Account# 6034590700778936 \$3,226.75 See Nelson, Watson & Assoc., LLC Associates, LLC				Duplicate
Sheet no. <u>9</u> of <u>12</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ \$0.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total▶ \$ \$131,259.79

In re Michael and Lisa James  
 Debtor

Case No. \_\_\_\_\_  
 (if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6034590700778936 Nelson, Watson & Associates, LLC 80 Merrimack Street Lower Level Haverhill, MA 01030		J	Collection for GE Money Bank/ABT TV Account# 6034590700778936				\$3,226.75
ACCOUNT NO. 7714230347822017 GE Money Bank/Sam's Club PO Box 530942 Atlanta, GA 30353-0942		W	04/07 - 12/08 Store credit card \$1,605.25 See Jacob Collection Group, LLC 250988				Duplicate
ACCOUNT NO. 1754972 NCC Business Services, Inc. 3733 University Boulevard, West Suite 300 Jacksonville, FL 32217		W	Collection for GE Money Bank/Sam's Club 7714230347822017 \$1,634.25 See Jacob Collection Group, LLC 250988				Duplicate
ACCOUNT NO. 17171471 Academy Collection Service, Inc. 10965 Decatur Road Philadelphia, PA 19154-3210		W	Collection for GE Money Bank/Sam's Club 7714230347822017 \$1,634.25 See Jacob Collection Group, LLC 250988				Duplicate
ACCOUNT NO. 250988 Jacob Collection Group, LLC 2623 West Oxford Loop Oxford, MS 38655-5442		W	Collection for GECC 7714230347822017				\$1,636.49
Subtotal▶							\$ \$4,863.24
Total▶ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							\$ \$131,259.79

Sheet no. 10 of 12 continuation sheets attached  
 to Schedule of Creditors Holding Unsecured  
 Nonpriority Claims

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6011361003540713 GE Money Bank/Sam's Club Discover PO Box 960013 Orlando, FL 32896-0013		W	12/02 - 07/09 Discover card \$10,087.48 See Credit Control, LLC 3988614				Duplicate
ACCOUNT NO. 176305 Pennco Associates, Inc. PO Box 538 Oaks, PA 19456		W	Collection for GE Money Bank/Sam's Club Discover 6011361003540713 \$9,444.00 See Credit Control, LLC 3988614				Duplicate
ACCOUNT NO. 6011361003540713 LVNV Funding, LLC P.O. Box 10584 Greenville, SC 29603		W	Collection for Sam's Club Discover 6011361003540713 \$11,818.00 See Credit Control, LLC 3988614				Duplicate
ACCOUNT NO. 3988614 Credit Control, LLC PO Box 488 Hazelwood, MO 63042		W	Collection for LVNV Funding, LLC 6011361003540713				\$11,093.46
ACCOUNT NO. 7001191141613050 HSBC Retail Services/Best Buy Co., Inc. Retail Services PO Box 17298 Baltimore, MD 21297-1298		J	06/07 - 01/09 Store credit card \$7,434.14 See Blatt, Hasenmiller, Liebsker & Moore, LLC 2282644				Duplicate
Sheet no. 11 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$11,093.46
							Total▶ \$131,259.79

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Michael and Lisa James,  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1696011141613050 Beneficial National Bank PO Box 15518 Wilmington, DE 19850-5518		J	Collection for HSBC Bank Nevada, N.A./Best Buy Account# 701191141613050 \$7,434.14 See Blatt, Hasenmiller, Liebsker & Moore, LLC 2282644				Duplicate
ACCOUNT NO. 11657575 Firstsource Advantage, LLC PO Box 628 Buffalo, NY 14240-0628		J	Collection for HSBC Bank Nevada, N.A./Best Buy Account# 701191141613050 \$7,286.03 See Blatt, Hasenmiller, Liebsker & Moore, LLC 2282644				Duplicate
ACCOUNT NO. 2282644 Blatt, Hasenmiller, Liebsker & Moore, LLC 125 South Wacker Drive Suite 400		J	Collection for HSBC Bank Nevada, N.A./Best Buy Account# 701191141613050				\$7,434.14
ACCOUNT NO. 86110004154053 Midwest Diagnostic Pathology, SC 75 Remittance Drive Suite 3070 Chicago, IL 60675-3070		J	06/28/08 - 06/29/09 Medical expenses				\$36.00
ACCOUNT NO. 86110004157757 Midwest Diagnostic Pathology, SC 75 Remittance Drive Suite 3070 Chicago, IL 60675-3070		J	06/28/08 - 06/30/09 Medical expenses				\$42.00
Subtotal▶							\$7,512.14
Total▶							\$131,259.79

Sheet no. 12 of 12 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): 2 daughters	AGE(S): 1 & 3 years
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	Toll Collector	Pharmacy Technician
Name of Employer	Illinois State Toll Highway Authority	Sherman Health
How long employed	12 years & 3 months	4 years & 9 months
Address of Employer	2700 Odgen Avenue Downers Grove, IL 60515	1425 North Randall Road Elgin, IL 60123

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$3,754.00	\$612.00
2. Estimate monthly overtime	\$701.00	\$0.00

3. SUBTOTAL

\$4,455.00	\$612.00
------------	----------

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues

d. Other (Specify): See attached

\$746.00	\$64.00
\$0.00	\$0.00
\$45.00	\$0.00
\$286.00	\$62.00

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$1,077.00	\$126.00
\$3,378.00	\$486.00

6. TOTAL NET MONTHLY TAKE HOME PAY

7. Regular income from operation of business or profession or farm  
(Attach detailed statement)

\$0.00	\$0.00
--------	--------

8. Income from real property

\$0.00	\$0.00
--------	--------

9. Interest and dividends

\$0.00	\$0.00
--------	--------

10. Alimony, maintenance or support payments payable to the debtor for  
the debtor's use or that of dependents listed above

\$0.00	\$0.00
--------	--------

11. Social security or government assistance

(Specify): N/A

\$0.00	\$0.00
--------	--------

12. Pension or retirement income

\$0.00	\$0.00
--------	--------

13. Other monthly income

(Specify): N/A

\$0.00	\$0.00
--------	--------

14. SUBTOTAL OF LINES 7 THROUGH 13

\$0.00	\$0.00
--------	--------

15. AVERAGE MONTHLY INCOME (Add amounts on lines 6 and 14)

\$3,378.00	\$486.00
\$3,864.00	

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column  
totals from line 15)(Report also on Summary of Schedules and, if applicable,  
on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6I (Official Form 6I) (12/07)

In re Michael and Lisa James  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

4. LESS PAYROLL DEDUCTIONS	DEBTOR	SPOUSE
d. Other (Specify): <u>Retirement</u>	<u>\$178.00</u>	<u>\$31.00</u>
d. Other (Specify): <u>Savings# 833161006</u>	<u>\$108.00</u>	<u>\$0.00</u>
d. Other (Specify): <u>Loan from retirement account</u>	<u>\$0.00</u>	<u>\$31.12</u>
Subtotal	<b>\$286.00</b>	<b>\$62.00</b>

In re Michael and Lisa James,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

- |  |                   |
|--|-------------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$2,077.00        |
| a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |                   |
| b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |                   |
| 2. Utilities: a. Electricity and heating fuel  | \$212.00          |
| b. Water and sewer   | \$35.00           |
| c. Telephone   | \$31.00           |
| d. Other <u>Refuse \$33.00, 2 cell phones \$130.00</u>   | \$163.00          |
| 3. Home maintenance (repairs and upkeep)   | \$50.00           |
| 4. Food  | \$500.00          |
| 5. Clothing  | \$100.00          |
| 6. Laundry and dry cleaning  | \$20.00           |
| 7. Medical and dental expenses   | \$85.00           |
| 8. Transportation (not including car payments)   | \$250.00          |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$122.00          |
| 10. Charitable contributions   | \$0.00            |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  |                   |
| a. Homemaker's or renter's   | \$0.00            |
| b. Life  | \$0.00            |
| c. Health  | \$0.00            |
| d. Auto  | \$100.00          |
| e. Other <u>N/A</u>  | \$0.00            |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  |                   |
| (Specify) <u>N/A</u>   | \$0.00            |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)   |                   |
| a. Auto  | \$0.00            |
| b. Other <u>N/A</u>  | \$0.00            |
| c. Other <u>N/A</u>  | \$0.00            |
| 14. Alimony, maintenance, and support paid to others   | \$0.00            |
| 15. Payments for support of additional dependents not living at your home  | \$0.00            |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$0.00            |
| 17. Other <u>Preschool tuition</u>   | \$130.00          |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | <b>\$3,875.00</b> |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:                                 |                   |

**20. STATEMENT OF MONTHLY NET INCOME**

- |  |            |
|--|------------|
| a. Average monthly income from Line 15 of Schedule I | \$3,864.00 |
| b. Average monthly expenses from Line 18 above       | \$3,875.00 |
| c. Monthly net income (a. minus b.)                  | \$-11.00   |

In re Michael and Lisa James,  
Debtor

Case No. \_\_\_\_\_  
(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 28 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 12/22/09

Signature: \_\_\_\_\_

Date 12/22/09

Signature: \_\_\_\_\_

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

N/A

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_ Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the N/A [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (12/07)

UNITED STATES BANKRUPTCY COURT

Northern DISTRICT OF Illinois

In re: Michael and Lisa James  
Debtor

Case No. (if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

\$142,291

Husband, employment at Illinois Tollway, 2007 \$45,285 / 2008 \$45,081 / 2009 \$51,925

\$42,644

Wife, see attachment

**2. Income other than from employment or operation of business**

None  
☒

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

**3. Payments to creditors**

*Complete a. or b., as appropriate, and c.*

None  
☒

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF  
PAYMENTS

AMOUNT  
PAID

AMOUNT  
STILL OWING

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF  
PAYMENTS/  
TRANSFERS

AMOUNT  
PAID OR  
VALUE OF  
TRANSFERS

AMOUNT  
STILL  
OWING



None



c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	----------------------	---------------------------------	--------------------------

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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#### 5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, <u>FORECLOSURE SALE,</u> TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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Fifth Third Bank  
PO Box 630778, Cincinnati, OH 45263-0778

12/09/2009 - 01/20/2009

2007 Fleetwood Avalon (camper)

**6. Assignments and receiverships**

None  
☒

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS  
OF ASSIGNEE

DATE OF  
ASSIGNMENT

TERMS OF  
ASSIGNMENT  
OR SETTLEMENT

None  
☒

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS  
OF CUSTODIAN

NAME AND LOCATION  
OF COURT  
CASE TITLE & NUMBER

DATE OF  
ORDER

DESCRIPTION  
AND VALUE  
Of PROPERTY

**7. Gifts**

None  
☒

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS  
OF PERSON  
OR ORGANIZATION

RELATIONSHIP  
TO DEBTOR,  
IF ANY

DATE  
OF GIFT

DESCRIPTION  
AND VALUE  
OF GIFT

**8. Losses**

None  
☒

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION  
AND VALUE OF  
PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF  
LOSS WAS COVERED IN WHOLE OR IN PART  
BY INSURANCE, GIVE PARTICULARS

DATE  
OF LOSS

**9. Payments related to debt counseling or bankruptcy**

None  
☒

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**10. Other transfers**

None  
☐

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Luis Escobar, 945 Westmoreland Drive, Vernon Hills, IL 60061, no relation	04/15/09	2000 Toyota Tundra, \$6,800.00

None  
☒

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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**11. Closed financial accounts**

None  
☐

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
Cary Bank & Trust 60 East Main Street Cary, IL 60013	Savings# 3640010280 \$32.08	12/03/09

**12. Safe deposit boxes**

None  
☒

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None  
☒

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  
☒

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None  
☒

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18. Nature, location and name of business**

None



a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in

which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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None  
☒

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

#### 19. Books, records and financial statements

None  
☒

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

None  
☒

b. List all firms or individuals who within **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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None  
☒

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None  
☒

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

**20. Inventories**

None  
☒

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT  
OF INVENTORY  
(Specify cost, market or other  
basis)

None  
☒

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES  
OF CUSTODIAN  
OF INVENTORY RECORDS

**21 . Current Partners, Officers, Directors and Shareholders**

None  
☒

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None  
☒

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

**22 . Former partners, officers, directors and shareholders**

None  
☒

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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None  
☒

b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

None  
☒

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

None  
☒

If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER-IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

**25. Pension Funds.**

None  
☒

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER-IDENTIFICATION NUMBER (EIN)
----------------------	--------------------------------------

\* \* \* \* \*

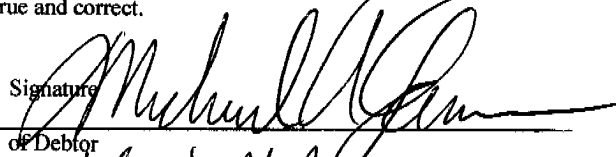


*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

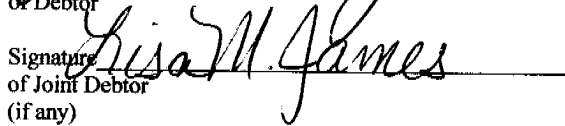
Date 12/22/09

Signature  
of Debtor



Date 12/22/09

Signature  
of Joint Debtor  
(if any)



*[If completed on behalf of a partnership or corporation]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date \_\_\_\_\_

Signature

N/A

Print Name and Title

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

1 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

N/A

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social-Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal, responsible person, or partner who signs this document.*

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.*

B7 (Continuation Sheet)

## UNITED STATES BANKRUPTCY COURT

Northern DISTRICT OF Illinois

In re: Michael and Lisa James,  
Debtor

Case No. \_\_\_\_\_  
(if known)

### STATEMENT OF FINANCIAL AFFAIRS

(Continuation Sheet)

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#### 1. Income from employment or operation of business (continued)

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately proceeding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

\$42,644

Wife, employment at Sherman Health 2007 \$23,149 / 2008 \$12,259 / 2009 \$6,018

Wife, employment at Northern Illinois Medical Center 2007 \$1,107 / 2008 \$111 / 2009 (N/A)